FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

,	MENT # P95000 IAN MRI IN ORLANDO, P.A	•	9)			(A)
Principal Place of Business Mailing Address						HI OIOI III III HIII IIII III
2010 8. ORANGE AVENUE ORLANDO FL 32808 US		2010 S. ORANGE AVENUE ORLANDO FL 32606 US		DO NOT WRITE IN THIS	S SPACE	
					3. Date Incorporated or Qualified	
A Principal D	land of Puninger	2a. Mailing Address			08/22/1995	
2. Principal Place of Business		26, Maning Address		4, FEI Number 59-3357390	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		f	\$8.75 Additional	
22		27	<u>-</u>		5. Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Cou	ntry	Trust Fund Contribution	Added to Fees
24	25	29	30	y	B. This corporation owes or has paid the corporate Property Tax due June 30.	urrent year Intangible Yes No
	9. Name and Address of Currer		1001		10. Name and Address of New Registered	
TAL	TE 105 LAHASSEE FL 32301 to the provisions of Sections 607.050	22 and 607.1508, Flo rida S ta	atules, the at	84 City	Forestion submits this statement for the purpose	of changing its registered
SIGNATURE	Signature, typed or pointed manic of registered age				ation's board of directors. I hereby accept the ap	
TITLE	PTD	DELETE	1.1 [1]	LE.	ADDITIONS/CHANGES TO OFFICERS AF	Change Addition
NAME	DAMADIAN, RAYMOND V		1.2 NA	.ME		
STREET ADDRESS	110 MARCUS DRIVE		1.3 \$1	REE1 ADDRESS		
CITY-ST-ZIP	MELVILLE NY	Driett		IY-SI-ZIP		[] 6 [] [] 3.200
TITLE NAME	damadian, Timothy R	☐ DELETE	2.1 TIT 2.2 NA			Change Addition
STREET ADDRESS	110 MARCUS DRIVE			REET ADDRESS		
CITY-ST-ZIP	MELVILLE NY			TY-SI-ZIP		
TITLE		DELETE	3.1 TII			Change Addition
NAME			3.2 NA	.ME		
STREET ADDRESS			3351	reet address		
CITY-ST-ZIP				TY-ST-ZIP		- - - - - - - - - -
TITLE		☐ DELETE	4.1 TIT			Change Addition
NAME STREET ADDRESS			4. 2 N			
STREET ADDRESS				REF1 ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5.1 TIT	IY-ST-ZIP LE		Change Addition
NAME		****	5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-S1-ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	61111			☐ Change ☐ Addition
NAME			6.2 NA	ME)		
STREET ADDRESS			6.3 ST	REET ADDRESS		

6.4 CITY- \$1-2IP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.